As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is isted below) or an original, first and

	joint inventor (if plural names are listed below) of the subject matter which is claimed and for which	ch a
TP	patent is sought on the invention entitled:	
' O	Improved Phytases	
	بي 2000	
APR 1	ži	
	Art he specification of which (check only one item helow).	
ATENTA	is attached hereto	
PATENT &	[X] was filed as United States application	
	Application No. 09/488,265	
	on January 20, 2000	
	and was amended	
	on	
	[] was filed as PCT international application	

Number

and was amended under PCT Article 19

on

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other htan the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY		DATE OF FILING	PRIORITY CLAIMED		
(if PCT, indicated "PCT")	APPLICATION NUMBER	PPLICATION NUMBER (day, month, year)			
Denmark	PA 1999 00092	22 January 1999	[X] YES [] NO		
Denmark	PA 1999 01340	21 September 1999	[X] YES [] NO		
United States	60/117,659	28 January 1999	[X] YES [] NO		
United States	60/156,495	28 September 1999	[X] YES [] NO		
			[]YES []NO		

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes, Reference to PCT International Applications)

Attorney's Docket Number:

5808.200-US

I hereby claim the benefit under Title 35, United States Code '120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this applications is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, '112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, '1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT

<u> </u>					UNDER 35 U.S.C. 120:	GNATING THE U	.S. FOR BENI	EFIT 	
			U.S. A	PPLICATIONS			STAT	US (Check on	e)
U.S. APPLICATION NUMBER			ER		U.S. FILING DATE		Patented	Pending	Abandoned
									
				,					
					•				
		PCT	APPLICATION	S DESIGNATING	THEUS				
	APPLICATION								1
	AFFLICATION NO.		FIL	ING DATE US SERIAL NUMBERS ASSIGNED (if any)		s 			
		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·					
POV	ER OF ATTORNEY	: As a named in	ventor, I hereby	appoint the followi	ng attorney(s) and/or agent(s) to prosecu	ate this application	and transact al	I husiness in the P	atent and
	emark Office connec 28 Reg. No. 35,127					Robert L. Starnes	Reza Green, 1	Reg. No. 30,335	Reg. No.
Sen	d Correspondence	o: Steve T. Zels	on, Esq.				Direct Tel	ephone Calls To:	
		405 Lexingto	of North America Avenue, Suite 6	400				. Zelson 67-0123	
1	Full Name	New York, N	lew York 10174-	6400	First Given Name		Second Given Name		
	of Inventor	Lehmann City			Martin		Second Giv	en Name	
	Residence &				State or Foreign Country		Country of Citizenship		
	Citizenship	Princeton			United States		Germany		
	Post Office Address	Post Office Address			City		State & Zip Code/Country		
	P. Illy	258 Sayre Drive		Princeton		New Jersey 07043, USA			
2	Full Name of Inventor	Family Nam	e		First Given Name		Second Give		
	Residence &	Residence & City			State or Foreign Country		Country of Citizenship		
	Citizenship Post Office Address Address			State of Poleign Country		Country of	Citizenship		
				City		State & Zip	Code/Country		
3	Full Name of Inventor				First Given Name		Second Give	en Name	
						i			
	Residence & Citizenship	City			State or Foreign Country		Country of	Citizenship	
	Post Office Post Office Address Address			C'					
				City		State & Zip Code/Country			
4	Full Name of Family Name				E. C.				
	Inventor	Lamily Name		First Given Name		Second Given Name			
\dashv	Residence &	City			State or Foreign Country		Country of	itizanshir	
	Citizenship				Same of Poreign Country		Country of Citizenship		
\dashv	Post Office Post Off		dress		City		State & Zip	Code/Country	
_	Address						•	,	

٠- اخر	<u> </u>							
C(In	OMBINED DEC	CLARATION FOR PATEMENT OF THE PARTY OF THE P	NT APPLICATI	ION AND POWER OF ATTORNEY	Attorney's Docket Number: 5808.200-US			
5	Full Name of Inventor	Family Name		First Given Name	Second Given Name			
	Residence & Citizenship	City	-	State or Foreign Country	Country of Citizenship			
	Post Office Address	Post Office Address		City	State & Zip Code/Country			
6	Full Name of Inventor	Family Name		First Given Name	Second Given Name			
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship			
	Post Office Address	Post Office Address		City	State & Zip Code/Country			
7	Full Name of Inventor	Family Name		First Given Name	Second Given Name			
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship			
	Post Office Address	Post Office Address		City	State & Zip Code/Country			
8	Full Name of Inventor	Family Name		First Given Name	Second Given Name			
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship			
	Post Office Address	Post Office Address		City	State & Zip Code/Country			
9	Full Name of Inventor	Family Name		First Given Name	Second Given Name			
	Residence & Citizenship	City		State or Foreign Country	Country of Citizenship			
	Post Office Address	Post Office Address		City	State & Zip Code/Country			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing								
Signature of Inventor 1			Signature of Inventor 2		Signature of Inventor 3			
31.1.2000 Signature of Inventor 4			Date Signature of Inventor 5		Date			
Date					Signature of Inventor 6 Date			
Simplify of Investor 7								